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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT** # 1. Corporation Name

P94000037648 (0)

FULTON CONSTRUCTION CO., INC.

| Principal Place of Business   | Mailing Address   | ··· var   |   |                                    |
|---|---|---|---|------------------------------------|
| 13630 58TH STREET NORTH<br>STE. 106<br>CLEARWATER FL 34620  | 13630 58TH STREET N<br>STE. 106<br>CLEARWATER FL 34620                  | -   | Date Incorporated or Qualified     05/16/1994   | 3a. Date of Last Report 05/01/1995 |
| 2. Principal Place of Business  | 2a. Mailing Address   |   | 4. FEI Number   | Applied For                        |
| 21 13920 - 5eth Street North 26 P.O. Bar  |   | 0095  | 59-3257785  | Not Applicable                     |
| Suite, Apt. #, etc.   | Suite. Apt. #, etc.   |   | 5. Certificate of Status Desired  | \$8.75 Additional                  |
| 12 Suite 1005   | 27  |   |   | ree nequired                       |
| City & State  Cle or worter FL  | City & State  | _   | 6. Election Campaign Financing Trust Fund Contribution  S5.00 May Be Added to Fees                        |                                    |
| Zip Country   | Zin   | Country   | This corporation has liability for in   | Added to Fees                      |
| 25 25   | 29 34643  | 30 U SA   | Florida Statutes  |                                    |
| 9. Name and Address of Curre  | ent Registered Agent  |   | 10. Name and Address of New R   | egistered Agent                    |
| FULTON, ROBERT S<br>13630 58TH STREET NORTH<br>STE. 106<br>CLEARWATER FL 34620  |   | 82 Street Addi<br>1392<br>83 Sixe<br>84 City<br>Clea  | ton, Robert S. ress (P.O. Box Number is Not Acceptable 0 - 58 <sup>th</sup> St. No. 1005                  | FL 85 7/p Code 346 20              |
| 12. OFFICERS AT TITLE*  NAME  D  FULTON, ROBERT S   | California NOT                      | _   | rd of directors. Thereby accept the appo<br>Y. S. Fulton<br>I discuss stangt<br>ADDITIONS/CHANGES TO OFFI | 4/30/96<br>DATE                    |
| STREET ADDRESS 13630 58TH STREET NORT CLEARWATER FL 34620 TITLE D NAME FULTON, DEBORAH L STREET ADDRESS 13630 58TH STREET NORTH   | DELETE  | 1.3 STREET ADDRESS<br>1.4 CHY-ST-ZIP<br>2.1 DT.6<br>2.2 NAME<br>2.3 STREET ADDRESS          |   | trange Addition                    |
| CITY-ST-ZIP CLEARWATER FL 34620   | •   | 24 CITY - ST - ZIP  |   |                                    |
| TITLE NAME STREET ADDRESS   | ☐ DELETE  | 3 1 TITLE<br>32 NAME<br>33 STREET ADDRESS   | . 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.  | ☐ Change ☐ Addition                |
| CITY-ST-ZIP TITLE   | DELETE  | 3.4.C/TY+ST Z/P<br>4.1.T/TLE  |   | C) Change C Addition               |
| IAME  | - Decem   | 4 2 NAME  |   | Change Addition                    |
| STREET ADDRESS  |   | 4.3 STREET ADDRESS  |   |                                    |
| CITY - ST - ZIP   |   | 4.4 CITY - \$T - ZIP  |   |                                    |
| DILE  | DELETE  | 5 11:11.8   |   | Change Addition                    |
| LAME  |   | 5.2 NAME  |   |                                    |
| STREET ADDRESS  |   | 5 3 STREET ADDRESS  |   |                                    |
| OTY-ST-ZIP  | DELETE  | 5 4 C(TY - ST - 2(F<br>6 1 T(TLE  |   | Change Addition                    |
| VAME  | [ Ditter  | 6 2 NAME  |   | ☐ Grid ige ☐ Add IIII:             |
| STREET ADDRESS  |   | 6.3 STREET ADDRESS  |   |                                    |
| C(Ty-ST-Z)F   |   | 64 City - St - ZiP  |   |                                    |
| 14. I do hereby certify that the information supplied<br>certify that the information indicated on this and<br>oath; that I am an officer or director of the corp<br>appears in Block 12 or Block 13 if changed, or | nual report or supplemental annu<br>ioration or the race ver or trustec | shed and does not qualify fi<br>all report is true and accura-<br>empowered to execute this | ite and that my signature shall have the s  | same legal effect as if made under |
| SIGNATURE: SIGNATURE AND TYPED O  | DR PRINTED NAME OF SIGNING OFFICER                                      | obert S. Fulta  | 9/30/96 Jale  | (813)532-9033                      |